## UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: 2/15/05   2 Serial/Patent # 10/072/178					
3 Please refund the following fee(s):		4 PAP NUM	ER BER	5 DATE FILED	6 AMOUNT
	Filing				\$
	Amendment			/ .	\$
V	Extension of Time			11/19/04	\$ 490
	Notice of Appeal/Appeal				\$
	Petition				\$
	Issue				\$
	Cert of Correction/Terminal Disc.				\$
	Maintenance				\$
	Assignment				\$
	0ther				\$
		7 TOTAL AMOUNT OF REFUND			\$490
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
	Overpayment	V	/ <u>c</u> :	redit Depo	osit A/C #:
	Duplicate Payment		9 1	90	15/3
V	No Fee Due (Explanation):				
MAXIMUN PRINT EXPCRE					
,					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: CHARLEMA GRANT TITLE: Atty					
signature: C Strent phone: X-32/5					
OFFICE: PRAMILE					
THIS SPACE RESERVED FOR FINANCE USE ONLY:  APPROVED: DATE:					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B